

IN FINDS 3

CDG SPEND USA No. 22335-XX Form Approved OMB No. 255-0070-01

EPA
 U.S. ENVIRONMENTAL PROTECTION AGENCY
 NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

INSTALLATION'S EPA ID NO. **Not on P.O.**

NAME OF INSTALLATION

INSTALLATION MAILING ADDRESS

LOCATION OF INSTALLATION

COPY RECEIVED

PLEASE PLACE LABEL IN THIS SPACE

JUL 18 1984

10 AUG 1984

WMD-RAIU
 EPA, REGION V

INSTRUCTIONS: If you received a preprinted label, affix it in the space at left. If any of the information on the label is incorrect, draw a line through it and supply the correct information in the appropriate section below. If the label is complete and correct, leave Items I, II, and III below blank. If you did not receive a preprinted label, complete all items. "Installation" means a single site where hazardous waste is generated, treated, stored and/or disposed of, or a transporter's principal place of business. Please refer to the INSTRUCTIONS FOR FILING NOTIFICATION before completing this form. The information requested herein is required by law (Section 3010 of the Resource Conservation and Recovery Act).

15 AUG 1984

FOR OFFICIAL USE ONLY

COMMENTS

Cook County

INSTALLATION ID NUMBER: **FILLD0025246591011**

APPROVED: **A**

DATE RECEIVED (mo., day, & yr.): **8/4/84**

Hall Aluminum Co
 W/031215002

I. NAME OF INSTALLATION: **HALL ALUMINUM CO**

II. INSTALLATION MAILING ADDRESS

STREET OR P.O. BOX: **1751 STATE ST**

CITY OR TOWN: **CHICAGO HEIGHTS** ST.: **IL** ZIP CODE: **60641**

RECEIVED
 AUG 20 1984
 IEPA-DLPC

III. LOCATION OF INSTALLATION

STREET OR ROUTE NUMBER: **1751 STATE ST**

CITY OR TOWN: **CHICAGO HEIGHTS** ST.: **IL** ZIP CODE: **60641**

COOK
 031

IV. INSTALLATION CONTACT

NAME AND TITLE (last, first, & job title): **RETSKY DONALD PRES.**

PHONE NO. (area code & no.): **312-757-7350**

V. OWNERSHIP

A. NAME OF INSTALLATION'S LEGAL OWNER: **HALL ALUMINUM CO**

VI. TYPE OF HAZARDOUS WASTE ACTIVITY

A. FEDERAL B. NON-FEDERAL C. TREAT/STORE/DISPOSE OF D. UNDERGROUND INJECTION

A. GENERATION B. TRANSPORTATION (complete item VII.)

VII. MODE OF TRANSPORTATION (check all that apply)

A. AIR B. RAIL C. HIGHWAY D. WATER E. OTHER (specify): **N/A**

VIII. FIRST OR SUBSEQUENT NOTIFICATION

Mark 'X' in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your installation's EPA I.D. number in the space provided below:

A. FIRST NOTIFICATION B. SUBSEQUENT NOTIFICATION (complete item C.)

EPA I.D. NUMBER: **8/13/84**

DESCRIPTION OF HAZARDOUS WASTE:



